

**TRANS****State of North Carolina**  
Department of Environment and Natural Resources  
Division of Waste Management**TRANSFER STATION**  
Facility Annual Report  
For the period of **July 1, 2011-June 30, 2012**

According to (G.S. 130A-309.09D(b)) completed forms must be returned by August 1, 2012 and a copy of this report must be sent to the County Manager of each county from which waste was received. If you have questions or require assistance in completing this report, contact your Regional Environmental Senior Specialist.

Facility Name: Watauga County Transfer Facility Permit: 9503T-TRANSFER-1996 ID: P0431Facility Website (URL): wataugacounty.org

Physical Address		Mailing Address	
Street 1: <u>336 Landfill Road</u>		Street 1: <u>same</u>	
Street 2: _____		Street 2: _____	
City: <u>Boone</u> County: <u>Watauga</u>		City: _____	
State: <u>North Carolina</u> Zip: <u>28607</u>		State: <u>North Carolina</u> Zip: _____	

  

Primary Facility Contact Person		Billing Contact Person	
Name: <u>JV Potter</u>		Name: <u>Donna Watson</u>	
Phone: <u>(828) 264-5305</u> Fax: <u>(828) 264-1702</u>		Phone: <u>(828) 264-5305</u> Fax: <u>(828) 264-1702</u>	
Email: <u>jv.potter@watgov.org</u>		Email: <u>donna.watson@watgov.org</u>	

1. Tipping Fee: \$49.00 per Ton (Attach a schedule of tipping fees if appropriate.)Does the tip fee above include the \$2.00 Solid Waste Tax? ☒ Yes ☐ No2. Did your facility stop receiving waste during this past Fiscal Year? ☐ Yes ☒ No

If so, please report the date this occurred: \_\_\_\_\_

3. Are there SWANA or other certified operator(s) at this facility? ☒ Yes ☐ No

If yes, indicate the following:

Name: Jimmy Johnson Certification type and expiration date: Transfer Station- 11/16/2013Name: Terry Scott Certification type and expiration date: Transfer Station- 11/16/2013Name: Mike Davis Certification type and expiration date: Transfer Station- 3/12/2013

4. What other activities occur at this facility? (check all that apply)

☒ Recycling/Reuse Collection ☒ Scrap Tire Collection ☒ White Goods Collection ☒ Household Hazardous Waste Collection

If you checked Recycling/Reuse Collection, please indicate the materials accepted: (check all that apply)

<input checked="" type="checkbox"/> Paper	<input checked="" type="checkbox"/> Wood	<input type="checkbox"/> Concrete/rubble/asphalt	<input type="checkbox"/> Gypsum/drywall
<input checked="" type="checkbox"/> Cardboard	<input checked="" type="checkbox"/> Glass	<input checked="" type="checkbox"/> Aluminum Cans	<input checked="" type="checkbox"/> Steel Cans
<input checked="" type="checkbox"/> PETE (#1) Plastic	<input checked="" type="checkbox"/> HDPE (#2) Plastic	<input checked="" type="checkbox"/> Computer Equipment	<input checked="" type="checkbox"/> Televisions
<input checked="" type="checkbox"/> Fluorescent lightbulbs	<input checked="" type="checkbox"/> Used oil/oil filters	<input type="checkbox"/> Other Metal	<input checked="" type="checkbox"/> Other Plastic
<input type="checkbox"/> Other (specify) _____			

**RECEIVED**

JUL 20 2012

SOLID WASTE SECTION  
ASHEVILLE REGIONAL OFFICE

5. Total waste received (INCLUDING WASTE TRANSFERRED AND RECYCLED) at this facility during the period of July 1, 2011, through June 30, 2012. Indicate **tonnage** received by COUNTY of waste origin. Please indicate COUNTY and STATE, if received from another state.

[illegible]

6. Indicate the facility(s) that received your facility's non-recycled waste material:

Grand Total	38,943
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NAME, PERMIT #, and LOCATION (city, state) of FACILITY	Facility Type	Tons
Foothills Environmental, Lenoir NC permit#14-03	MSW Landfill	37,659
<b>TOTAL</b>		37,659.00

**REMINDER:** According to (G.S. 130A-309.09D(b)), this report must be sent to the Regional Environmental Senior Specialist for your area and a copy of this report must be sent to the County Manager of each county from which waste was received.

Please return your completed report to:

Deb Aja  
2090 US Highway 70  
Swannanoa, NC 28778  
phone: 828.296.4702 email: Deborah.Aja@ncdenr.gov

CERTIFICATION: I certify that the information provided is an accurate representation of the activity at this facility.

Signature:

Date: 7/16/2012

Name: JV Potter

Title: Operation Services Director

Phone Number: (828) 264-5305

Email: [jv.potter@watgov.org](mailto:jv.potter@watgov.org)